

**APPLICATION
TO THE
SEMINOLE COUNTY BOARD OF COMMISSIONERS
DEVELOPMENT REVIEW DIVISION**

FOR: VACATE AND ABANDONMENT OF A DRAINAGE EASEMENT
() **FEE: \$370.00**
(Make Check Payable to SEMINOLE COUNTY)

1. APPLICANT NAME: _____
Address: _____

Phone No.: () _____ **Fax No.:** () _____ **E-Mail:** _____

2. OWNER NAME: _____
Address: _____

Phone No.: () _____ **Fax No.:** () _____ **E-Mail:** _____

3. LEGAL DESCRIPTION OF EASEMENT AREA TO BE VACATED

- ANY ERRORS IN THE LEGAL DESCRIPTION MAY RESULT IN AN UNTIMELY DELAY IN THE PROCESSING OF THIS REQUEST.
- PLEASE PROVIDE IN A DIGITAL FORMAT WITH THIS APPLICATION OR ARRANGE TO EMAIL PROJECT MANAGER.
- GASB 34 IS A FEDERAL REGULATION REQUIRING THE TRACKING OF EASEMENTS. IN RESPONSE TO THIS REQUIREMENT, PLEASE SUBMIT THE AREA (IN ACRES) OF THE EASEMENT TO BE VACATED.

4. PROPERTY DESCRIPTION OF AREA TO BE VACATED:

PROPERTY APPRAISER PARCEL ID No.: _____

SUBDIVISION NAME: _____ **LOT:** _____

BLOCK: _____ **PLAT BOOK:** _____ **PAGE:** _____

GENERAL LOCATION: _____

5. SPECIFIC REASON FOR REQUEST: _____

**6. NAME OF ADDITIONAL CO-APPLICANTS (IF ANY)
ASSOCIATED WITH VACATE:**

_____ **OWNER OF:** _____
_____ **OWNER OF:** _____

7. THE FOLLOWING INFORMATION MUST ACCOMPANY EACH APPLICATION FOR THE VACATING OF A DRAINAGE EASEMENT:

- A.** APPLICATION TO VACATE WITH REQUIRED FEE PAYABLE TO SEMINOLE COUNTY.
- B.** SITE PLAN OR SURVEY / SKETCH OF DESCRIPTION SHOWING THE AREA TO BE VACATED, INCLUDING THE OVERALL PARCEL, DRAWN TO SCALE ON AN 8-1/2" X 14" SHEET, SUITABLE FOR RECORDING IN THE PUBLIC RECORDS.

8. SIGNATURE OF APPLICANT(S):

Signature: _____ **Printed/Typed Name:** _____

Signature: _____ **Printed/Typed Name:** _____

Signature: _____ **Printed/Typed Name:** _____